

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

Serial No. 097623488

Filing Date

Applicant(s)

CLAIMS

AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.						
1.					51					
2.					52					
3.					53					
4.					64					
5.					55					
6.					56					
7.					57					
8.					58					
9.					59					
10.					60					
11.					61					
12.					62					
13.					63					
14.					64					
15.					65					
16.					66					
17.					67					
18.					68					
19.					69					
20.					70					
21.					71					
22.					72					
23.					73					
24.					74					
25.					75					
26.					76					
27.					77					
28.					78					
29.					79					
30.					80					
31.					81					
32.					82					
33.					83					
34.					84					
35.					85					
36.					86					
37.					87					
38.					88					
39.					89					
40.					90					
41.					91					
42.					92					
43.					93					
44.					94					
45.					95					
46.					96					
47.					97					
48.					98					
49.					99					
50.					100					
TOTAL IND.					TOTAL IND.					
TOTAL DEP.	6				TOTAL DEP.					
TOTAL CLAIMS	7				TOTAL CLAIMS					